

Please type a plus sign (+) inside this box → 

Approved for use through 09/30/00. OMB 0651-0032

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number12/07/99  
1562 U.S. PTOUTILITY  
PATENT APPLICATION  
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

|   |             |             |    |
|---|-------------|-------------|----|
| Attorney Docket No.   | 15886-451   | Total Pages | 37 |
| <i>First Named Inventor or Application Identifier</i>                       |             |             |    |
| Arthur C. LAMB et al., "Collapsing Event Display for Small Screen Computer" |             |             |    |
| Express Mail Label No.  | EL324593479 | US          |    |

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

|   |  |
|---|--|
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form<br/><i>(Submit an original, and a duplicate for fee processing)</i></p> <p>2. <input checked="" type="checkbox"/> Specification <span style="float: right;">[Total Pages 23]</span><br/><i>(preferred arrangement set forth below)</i></p> <ul style="list-style-type: none"> <li>- Descriptive title of the Invention</li> <li>- Cross References to Related Applications</li> <li>- Statement Regarding Fed sponsored R&amp;D</li> <li>- Reference to Microfiche Appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings</li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul> <p>3. <input checked="" type="checkbox"/> Drawing(s) (37 CFR 1.152) <span style="float: right;">[Total Sheets 3]</span></p> <p>4. <input checked="" type="checkbox"/> Oath or Declaration <span style="float: right;">[Total Pages 3]</span></p> <ul style="list-style-type: none"> <li>a. <input type="checkbox"/> Newly executed (original or copy)</li> <li>b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))<br/><i>(for continuation/divisional with Box 17 completed)</i></li> </ul> <p style="text-align: center;"><i>[Note Box 5 below]</i></p> <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b><br/>Signed statement attached deleting<br/>inventor(s) named in the prior application,<br/>see 37 CFR 1.63(d)(2) and 1.33(b).</li> </ul> <p>5. <input checked="" type="checkbox"/> Incorporation By Reference <i>(useable if Box 4b is checked)</i><br/>The entire disclosure of the prior application, from which<br/>a copy of the oath or declaration is supplied under Box 4b,<br/>is considered as being part of the disclosure of the<br/>accompanying application and is hereby incorporated by<br/>reference therein.</p> | <p>6. <input type="checkbox"/> Microfiche Computer Program (<i>Appendix</i>)</p> <p>7. Nucleotide and/or Amino Acid Sequence Submission<br/><i>(if applicable, all necessary)</i></p> <ul style="list-style-type: none"> <li>a. <input type="checkbox"/> Computer Readable Copy</li> <li>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</li> <li>c. <input type="checkbox"/> Statement verifying identify of above copies</li> </ul> <p>8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet &amp; documents(s))</p> <p>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney by<br/><i>(when there is an assignee)</i> <input type="checkbox"/> Assignee</p> <p>10. <input type="checkbox"/> English Translation Document <i>(if applicable)</i></p> <p>11. <input type="checkbox"/> Information Disclosure Statement (IDS)PTO-1449 <input type="checkbox"/> Copies of IDS<br/>Statement (IDS)PTO-1449 <input type="checkbox"/> Citations</p> <p>12. <input checked="" type="checkbox"/> Preliminary Amendment (2 pages)</p> <p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br/><i>(Should be specifically itemized)</i></p> <p>14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application,<br/>Statement(s) <input type="checkbox"/> Status still proper and desired</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s)<br/><i>(if foreign priority is claimed)</i></p> <p>16. <input type="checkbox"/> Other: .....</p> |
|---|--|

## 16. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

 Continuation     Divisional     Continuation-in-part (CIP)    of prior application No. 09/037,157

## 17. CORRESPONDING ADDRESS

|   |           |  |
|---|-----------|--|
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label | 021971    | or <input type="checkbox"/> Correspondence address below |
| <i>Insert Customer No. or Attach bar code label here</i>              |           |  |
| NAME  |           |  |
|   |           |  |
| ADDRESS   |           |  |
|   |           |  |
| CITY  | STATE     | ZIP CODE   |
| COUNTRY   | TELEPHONE | FAX  |

## SUBMITTED BY

Typed or  
Printed Name

Kent R. Richardson

Reg. Number 39,443

Signature

Date December 7, 1999

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**FEE TRANSMITTAL**Note: Effective December 8, 1998  
Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)

800.00

**Complete if Known**

|                        |                       |
|------------------------|-----------------------|
| Application Number     | Unassigned            |
| Filing Date            | Herewith              |
| First Named Inventor   | Arthur C. LAMB et al. |
| Group Art Unit         | Unknown               |
| Examiner Name          | Unknown               |
| Attorney Docket Number | 15886-451             |

**METHOD OF PAYMENT (check one)**

1.  The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 23-2415 (15886-451)

Deposit Account Name Wilson Sonsini Goodrich &amp; Rosati

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17  Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance

2.  Payment Enclosed:  
 Check  Money Order  Other

**FEE CALCULATION****1. FILING FEE**

| Large Entity             |      |      |      | Small Entity           |          |
|--------------------------|------|------|------|------------------------|----------|
| Fee                      | Fee  | Fee  | Fee  | Fee Description        | Fee Paid |
| Code                     | (\$) | Code | (\$) |                        |          |
| 101                      | 760  | 201  | 380  | Utility filing fee     | 760.00   |
| 106                      | 310  | 206  | 155  | Design filing fee      |          |
| 107                      | 480  | 207  | 240  | Plant filing fee       |          |
| 108                      | 760  | 208  | 380  | Reissue filing fee     |          |
| 114                      | 150  | 214  | 75   | Provisional filing fee |          |
| <b>SUBTOTAL (1) (\$)</b> |      |      |      | <b>760.00</b>          |          |

**2. CLAIMS**

| Total Claims              | 11 | - 20 = | 0 | X | 18  | = | 0.00 | Extra | Fee from below | Fee Paid |
|---------------------------|----|--------|---|---|-----|---|------|-------|----------------|----------|
| Independent Claims        | 1  | - 3 =  | 0 | X | 78  | = | 0.00 |       |                |          |
| Multiple Dependent Claims |    |        | 0 | X | 260 | = | 0.00 |       |                |          |

**Large Entity**

| Large Entity             |      |      |      | Small Entity  |          |
|--------------------------|------|------|------|---|----------|
| Fee                      | Fee  | Fee  | Fee  | Fee Description   | Fee Paid |
| Code                     | (\$) | Code | (\$) |   |          |
| 103                      | 18   | 203  | 9    | Claims in excess of 20                                  |          |
| 102                      | 78   | 202  | 39   | Independent claims in excess of 3                       |          |
| 104                      | 260  | 204  | 130  | Multiple dependent claim                                |          |
| 109                      | 78   | 209  | 39   | Reissue independent claims over original patent         |          |
| 110                      | 18   | 210  | 9    | Reissue claims in excess of 20 and over original patent |          |
| <b>SUBTOTAL (2) (\$)</b> |      |      |      | <b>0.00</b>   |          |

**3. ADDITIONAL FEES**

| Large Entity   | Small Entity | Fee Description | Fee Paid  |
|--|--------------|-----------------|---|
| Fee  | Fee          | Fee             | Fee   |
| Code   | (\$)         | Code            | (\$)  |
| 105  | 130          | 205             | 65 Surcharge - late filing fee or oath  |
| 127  | 50           | 227             | 25 Surcharge - late provisional filing fee or cover sheet                     |
| 139  | 130          | 139             | 130 Non-English specification   |
| 147  | 2,520        | 147             | 2,520 For filing a request for reexamination                                  |
| 112  | 920*         | 112             | 920* Requesting publication of SIR prior to Examiner action                   |
| 113  | 1,840*       | 113             | 1,840* Requesting publication of SIR after Examiner action                    |
| 115  | 110          | 215             | 55 Extension for reply within first month                                     |
| 116  | 380          | 216             | 190 Extension for reply within second month                                   |
| 117  | 870          | 217             | 435 Extension for reply within third month                                    |
| 118  | 1,360        | 218             | 680 Extension for reply within fourth month                                   |
| 128  | 1,850        | 228             | 925 Extension for reply within fifth month                                    |
| 119  | 300          | 219             | 150 Notice of Appeal  |
| 120  | 300          | 220             | 150 Filing a brief in support of an appeal                                    |
| 121  | 260          | 221             | 130 Request for oral hearing  |
| 138  | 1,510        | 138             | 1,510 Petition to institute a public use proceeding                           |
| 140  | 110          | 240             | 55 Petition to revive - unavoidable   |
| 141  | 1,210        | 241             | 605 Petition to revive - unintentional  |
| 142  | 1,210        | 242             | 605 Utility issue fee (or reissue)  |
| 143  | 430          | 243             | 215 Design issue fee  |
| 144  | 580          | 244             | 290 Plant issue fee   |
| 122  | 130          | 122             | 130 Petitions to the Commissioner   |
| 123  | 50           | 123             | 50 Petitions related to provisional applications                              |
| 126  | 240          | 126             | 240 Submission of Information Disclosure Stmt                                 |
| 581  | 40           | 581             | 40 Recording each patent assignment per property (times number of properties) |
| 146  | 790          | 246             | 395 Filing a submission after final rejection (37 CFR 1.129(a))               |
| 149  | 760          | 249             | 380 For each additional invention to be examined (37 CFR 1.129(b))            |
| Other fee (specify) <u>25 Request for Corrected Filing Receipt</u> |              |                 |   |
| Other fee (specify) _____  |              |                 |   |
| * Reduced by Basic Filing Fee Paid                                 |              |                 |   |
| <b>SUBTOTAL (3) (\$)</b>   |              |                 |   |
| <b>40.00</b>   |              |                 |   |

**SUBMITTED BY**

| Typed or Printed Name | Complete (if applicable) |              |                         |
|-----------------------|--------------------------|--------------|-------------------------|
| Kent R. Richardson    |                          | Reg. Number  | 39,443                  |
|                       | Date                     | Dec. 7, 1999 | Deposit Account User ID |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.